

CARING FOR HEALTHCARE

A toolkit for psychological health and safety in healthcare workplaces



In 2013, Canada became the first country in the world to have a national standard for psychological health and safety in the workplace.

This toolkit shares the experiences of four healthcare organizations committed to embedding the Standard into their everyday operations. It outlines the very different journeys each has taken, their respective successes and challenges, and reveals a set of common principles that contribute to effective implementation.

The goal of this toolkit is for other healthcare organizations to take inspiration and practical lessons from these stories and apply them in their own context – so their workplaces can be psychologically healthy and safe, and their teams can have the understanding and resilience to provide the best possible quality of care.

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A RECOGNIZED LEADING PRACTICE

Implementing the Standard in healthcare organizations has been recognized by Accreditation Canada/Health Standards Organization as a Leading Practice. This designation brings further credibility to healthcare organizations implementing the Standard and can be used to gain buy-in with leadership.



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ABOUT THIS TOOLKIT

The *National Standard of Canada for Psychological Health and Safety in the Workplace* gives organizations in all sectors a framework for promoting mental health and preventing psychological harm at work. This toolkit was created specifically for the healthcare sector, to provide ideas and resources for implementing the Standard in what can often be a challenging and complex environment.

TWO KEY RESOURCES

This toolkit refers to a number of resources and references on the topic of workplace psychological health and safety. Two foundational ones are:

- [*The National Standard of Canada for Psychological Health and Safety in the Workplace*](#)

and

- [*Assembling the Pieces: An Implementation Guide to the National Standard for Psychological Health and Safety in the Workplace*](#)

Healthcare organizations are built to care for others. In providing that care, practitioners often overlook or deny their own needs, especially when it comes to their physical, mental and emotional wellbeing.

Yet with the pressures of a rapidly evolving healthcare system, radical advances in technology, shifting patient expectations and on-the-job risks of psychological harm and physical violence, the needs of healthcare staff and practitioners can be acute. Meeting them effectively has a direct impact on the quality of care delivered to patients — making workplace mental health a priority.

LEARNING FROM EXPERIENCE

Because every organization is different, and because psychological health and safety can touch on virtually every aspect of the healthcare workplace, there is no single “best practice” way of implementing the Standard. There are, however, lessons to be learned and insights available from looking at the experience of other organizations progressing along the implementation journey.

This toolkit tells the real-world stories of four such organizations: the Ontario Shores Centre for Mental Health Sciences, Alberta Health Services, Nova Scotia Health Authority and the

HOW TO USE THIS TOOLKIT

- **Read the STORIES** (including a sidebar on the implementation experience of Health Canada and the Public Health Agency of Canada)
- **Review the COMMON PRINCIPLES** that emerged across all the organizations’ experiences — as a starting point to affirm or plan your own implementation
- **Download and use the TOOLS and RESOURCES** compiled in the toolkit to advance your own implementation journey

Michael Garron Hospital. Each took part in the three-year national Case Study Research Project (CSRP) spearheaded by the MHCC in 2013 and is an active member of the By Health, For Health Collaborative. All four organizations are also signatories to the [*Declaration of Commitment to Psychological Health and Safety in Healthcare*](#) aligned with the National Standard and are true champions in this area.

KEY TERMS AND CONCEPTS

The following definitions are adapted from the *National Standard for Psychological Health and Safety in the Workplace*, the World Health Organization and other sources.

13 PSYCHOSOCIAL FACTORS —

These are factors that can affect workers' mental health. While the core 13 are universal to all workplaces, the Standard notes "other chronic stressors as identified by workers" may apply to specific sectors or workplaces. Consultations with healthcare organizations led the MHCC and HealthCareCAN to define two additional factors relevant to health care (as given below):

1. Organizational culture
2. Psychological and social support
3. Clear leadership and expectations
4. Civility and respect
5. Psychological demands
6. Growth and development
7. Recognition and reward
8. Involvement and influence
9. Workload management
10. Engagement

11. Balance
12. Psychological protection
13. Protection of physical safety
14. Moral distress
specific to healthcare
15. Psychological self-care
specific to healthcare

HARM — Anything that damages a person's health, including a physical or psychological injury.

HEALTH — A state of complete physical, social, and mental wellbeing that is due to more than just the absence of disease or infirmity. (*From the World Health Organization definition*)

HEALTHY WORKPLACE — Defined by the World Health Organization as a workplace that fosters "an enabling environment for healthy behaviours among workers, including... through occupational safety and health measures...."

MENTAL HEALTH (aka "psychological health") — A form of wellbeing that allows individuals to handle normal stresses, be productive and contribute to their communities through the realization of their own abilities.

ORGANIZATIONAL CULTURE — The underlying attitudes, assumptions, behaviours, beliefs and expectations of an organized group of people.

PSYCHOLOGICAL SAFETY — A condition in which people are free from threats of harm to their mental wellbeing.

PSYCHOLOGICALLY HEALTHY AND SAFE WORKPLACE — A workplace where psychological health and wellbeing are prioritized and where structures are in place to prevent psychological harm.



A DECLARATION OF CHANGE

The By Health, For Health Collaborative was formed in 2016 to advance psychological health and safety in the healthcare sector. More than 20 healthcare organizations are involved in the Collaborative, which is led by the Mental Health Commission of Canada in partnership with HealthCareCAN. This toolkit is a direct product of the Collaborative's action plan. Learn more about the Collaborative and its [Declaration of Commitment here](#), and [watch this video](#) about why your organization may want to join the movement.

STORIES FROM THE FIELD:

JOURNEYS OF CHANGE

The following stories describe how four healthcare organizations across the country at different stages in their organizational lifecycles have worked to build psychological health and safety into their organizational cultures and implement the Standard.



ONTARIO SHORES CENTRE FOR MENTAL HEALTH SCIENCES

Start with the end in mind – How Ontario Shores took a methodical, data-driven approach to implementing the Standard.



ALBERTA HEALTH SERVICES

Adaptation is key – Why Alberta Health Services adopted a long-term, incremental outlook on culture change to embed psychological health and safety.



NOVA SCOTIA HEALTH AUTHORITY

Change brings opportunity – Exploring the ways the Nova Scotia Health Authority has worked to build a top-down, ground-up acceptance of workplace mental health.



MICHAEL GARRON HOSPITAL

The right thing to do – How Michael Garron Hospital anchored psychological health and safety to patient outcomes.

SPECIAL FEATURE
A short account of how Health Canada contributed to the development of the Standard – and went on to implement it in their own organizations.



Ontario Shores
Centre for Mental Health Sciences

ONTARIO SHORES CENTRE FOR MENTAL HEALTH SCIENCES

START WITH THE END IN MIND

“We’ve worked hard to create a culture where staff feel comfortable sharing their feedback and trust that the organization will action that feedback to create meaningful change.”

— **Andrea Marshall**,
Director of Communications and Public Affairs, Volunteer Services, and CEO
Ontario Shores Centre for Mental Health Sciences

“You can’t always link cause and effect to this work. If you find you have more employees using the benefits plan to pay for stress medications, it is hard to know if that is a good thing or a bad thing.”

— **Amber Smith**
Learning and Development Specialist

With one in five Canadians likely to experience a mental health issue in their lifetimes, Ontario Shores realized a quarter of its workforce was at risk of having mental health needs go unmet. That fact, combined with a well-established commitment to healthcare innovation, made the organization leap at the chance to be part of an MHCC-led case study on implementing the National Standard for Psychological Health and Safety in the Workplace in 2013.

“As a leading mental healthcare organization, it was important to us to provide a mentally safe and healthy workplace,” says Learning and Development Specialist Amber Smith. “But there wasn’t any roadmap. Assembling the Pieces didn’t exist yet. Other sectors hadn’t tried anything like this. We knew we would have to create our own frameworks for implementation.”

The organization’s mantra was to start with the end in mind: to know what it was trying to change so it could measure and evaluate. Its initial area of focus — one that continues to be a priority today — was to increase the

supports available to clinical staff after critical incidents. It also aimed to address the stigma that often keeps healthcare providers from coming forward with their own needs, and to make psychological health and safety an openly addressed part of the organization’s culture.

The CEO was a champion from the beginning, fully backing the then Vice-President and Chief Nurse Executive who assembled teams, empowered leaders and made sure that even with limited resources everything that could be brought to bear was made available to the effort.

“We knew for this to be seen and felt, psychological health and safety had to live at all levels of the organization,” says Leigh-Ann Harper, People, Teams and Culture Specialist. “We used our commitment to the Standard to inform planning, decision-making and team development. We wove psychological health and safety into every element we could.”

A HOLISTIC APPROACH TO WELLNESS

In its first year of implementing the Standard, Ontario Shores drafted a policy statement reflecting its aim to make psychological health and safety part of the organization’s fabric.

“As we dove into the research, we found there were nine interconnected domains of wellness,” says Andrea Marshall, Director of Communications and Public Affairs, Volunteer Services, and CEO. “Our concept of integration expanded — beyond just embedding psychological health and safety into existing policies to the idea of incorporating all the interrelated forms of wellness. It wasn’t about any single domain of wellness alone.”

That led to the development of a cross-discipline, multi-departmental Integrated Wellness Plan (IWP) built on five pillars: Prevention of Harm, Promotion of Health, Resolution of Occurrences of Harm, Organizational Culture, and Sustainability and Continuous Improvement.

The creation of the IWP spurred a whole next wave of effort. It was built into Ontario Shores' annual corporate action planning process. By year three, there was also a defined change management framework, a set of communications initiatives, and a "Building Capability" program to strengthen employees' knowledge, awareness, skills and confidence.

MEASURING PROGRESS

For a data-driven organization, the impulse to measure and track was present from the outset. Since no single readymade tool existed to capture its initial current state in 2013, Ontario Shores combined the employee survey from Guarding Minds at Work — the workplace mental health tool commissioned by Great-West Life and developed by the Centre for Applied Research in Mental Health and Addiction — with the 13 psychosocial factors and audit tool from the Standard. It overlaid the results onto its own existing employee opinion survey results.

Later it struck a scorecard group to develop a tool for monitoring progress. That went through numerous iterations to find the best, most meaningful presentation of the data collected, including trying to match indicators to the five IWP pillars. None was ideal.

"We had a lot of data to choose from," says Smith, "but you can't always link cause and effect to this work. Or know clearly what the impacts mean. If you find you have more employees using the benefits plan to pay for stress medications, it is hard to know if that is a good thing or a bad thing."

The team continues to focus on measurement, looking to make the IWP more comprehensive and evolve its data practices. One of the most visible ways the organization has been able to evaluate its progress in advancing a culture of psychological health and safety in the workplace is through the Excellence Canada *Mental Health at Work Framework*. In 2017, Ontario Shores received Gold Level recognition for this work.

TOWARD A COLLABORATIVE CULTURE

Today, Ontario Shores has reached the "Sustainability and Continuous Improvement" stage of implementation. Psychological health and safety continues

to be governed through corporate action plans that are dedicated to employee wellbeing. The senior management team continues to give oversight to the work with the support from the Centre of Education and Organizational Development (CEOD) and other internal groups.

Reflecting on the organization's experience to date, the Ontario Shores team says adopting the Standard helped build trust and made it safe for employees to share their thoughts and experiences.

"Since this work began in 2013, we have really seen the development of a collaborative culture where psychological health and safety are front and centre," says Marshall.



[Read more about the lessons learned from Ontario Shores' experience and access tools and templates.](#)

OUR JOURNEY AT A GLANCE

2013

Ontario Shores becomes one of the first healthcare organizations to participate in the MHCC Standard implementation case study

2014

Drafts a policy statement committing to embedding psychological health and safety

2015

Creates the Integrated Wellness Plan

2016

Joins the By Health, For Health Collaborative

2017

Signs [By Health, For Health Declaration of Commitment to Psychological Health and Safety in Healthcare](#)



ALBERTA HEALTH SERVICES

ADAPTATION IS KEY

“We believe a psychologically safer environment leads to fewer injuries of all types and improvements in quality of care. People who feel better can do their jobs better.”

“It’s always a temptation to oversimplify. But we know that doesn’t work. We need to be slow and steady.”

— Jennifer Yelland, MSc
Senior Health & Wellness Advisor
Workplace Health and Safety, Human Resources
Alberta Health Services

Alberta Health Services is one of the largest integrated healthcare providers in the country. Its team of 110,000 nurses, staff, students, volunteers and physicians serves more than four million people across 650 sites, delivering everything from emergency services to acute, home and long-term care. How does an organization so large and distributed change its culture to adopt the National Standard for Psychological Health and Safety in the Workplace? Patiently, incrementally and by being adaptive.

The Workplace Health and Safety team at Alberta Health Services (AHS) already had in mind the idea of an organization-wide mental health strategy when the organization formed in 2009. They knew their first step should be a needs assessment — but weren’t sure how to go about it.

Their neighbours in the office building where they were headquartered, the Mental Health Commission of Canada, had a suggestion: why not become a Minding the Workplace pilot project site? The pilot included a needs assessment and the opportunity to try out a variety of programs and supports to promote mental health and psychological health and safety at work.

“The Minding the Workplace pilot project was a starting point,” says Norma Wood, Senior Program Officer for Workplace Health and Safety at AHS. “It included the Guarding Minds at Work assessment, which helped us understand what was going on. We jumped at the chance to gain that perspective. But even then, we knew we were just dipping our toe in.”

As requests for tools to support psychological health and safety efforts began to come in, the Workplace Health and Safety team produced them in-house, including two online training modules (one for leaders and another for employees), two toolkits on respectful behaviours, and a leader’s guide to

creating a healthier workplace. The team also explored other tools and programs, though some proved too expensive and others weren’t suited to the organization’s unique needs.

“We looked at lots of frameworks and resources” says Jennifer Yelland, Senior Health & Wellness Advisor. “It’s tempting to grab a packaged product and think it will solve the problem, but each group is unique and one size doesn’t always fit. When evaluating a program we need to keep in mind that it might work, but will it work for us? Adaptation is key.”

SHIFTING THE CULTURE

Given the scale and complexities of operating a province-wide health authority, the organization’s health and safety champions knew they had to persuade their leadership that psychological health and safety was a meaningful priority. At the same time, they had to get uptake and acceptance at the front lines.

“We recognized this is an adaptive challenge, not a technical challenge,” says Yelland. “It’s similar to how we influence people to stop smoking, eat healthy or be active. The dial won’t move until people have bought in and adapted. The literature says it takes 10 years to change culture. We knew it wouldn’t be the result of one single initiative. It’s been

hundreds of initiatives happening together, in different pockets.”

Those initiatives have been both top-down and grassroots. The organization sought to integrate aspects of wellness, mental health and psychological health and safety into its policies and practices wherever they fit. It has applied implementation of aspects of the Standard to accreditation-driven violence prevention policies, for example, and embedded them into its diversity and inclusion efforts. It has also made psychological health and safety a formal goal of the Alberta Health Services “Our People Strategy” — one of four foundational strategies.

At the same time, the organization has cultivated a frontline champion network: individuals passionate about caring for people and willing to spread the word about psychological health and safety. It has focused on creating opportunities for engagement — for example, through “People Moments” at the start of meetings when team members can share personal stories related to Alberta Health Services’ values of compassion, accountability, respect, excellence and safety (CARES).

“We’ve seen people open up and talk about their struggles and support each other,” says Wood. “It makes it OK to talk about your own mental health and helps get past some of the stigma that otherwise keeps people from acknowledging they may not be feeling their best.”

Groups throughout the organization have taken up the cause of psychological health and safety. The emergency medical services (EMS) group has mandated training for all paramedics, used the Guarding Minds at Work survey for its own staff and developed a health, wellness and culture program for EMS province-wide.

The sheer variety of initiatives underscores that there is no “silver bullet” solution to culture change in a massive organization.

“It’s always a temptation oversimplify,” says Yelland. “But we know that doesn’t work. We need to be slow and steady.”

ALWAYS MOVING FORWARD

Alberta Health Services signed the By Health, For Health Declaration in October 2017 and has created a Psychological Health and Safety Steering Committee, whose action plan includes establishing a baseline for measuring

change. Looking ahead, the organization will continue to test and experiment, tackle stigma, support early adopters of new psychological health and safety tools and frameworks — those “hundreds of initiatives” — and seek ways to strengthen buy-in and engagement.

“It really has been a journey,” says Wood. “We want to have an umbrella mental health strategy in the near future. Everything we’re doing now is about putting the foundations in place so the next generation has a workplace where psychological health and safety is just the way we do things.”



[Read more about the lessons learned from Alberta Health Services’ experience and access tools and templates.](#)

OUR JOURNEY AT A GLANCE

- 2009**
Alberta Health Services (AHS) forms
- 2012**
Undertakes Minding the Workplace pilot
- 2013**
Becomes one of the first healthcare organizations to participate in the MHCC Standard implementation case study
- 2016**
Makes psychological health and safety part of Our People strategy
- 2016**
Joins the By Health, For Health Collaborative
- 2017**
Signs the [By Health, For Health Declaration of Commitment to Psychological Health and Safety in Healthcare](#)
- 2017**
Establishes Psychological Health and Safety Steering Committee to guide efforts forward, including measurement



NOVA SCOTIA HEALTH AUTHORITY

CHANGE BRINGS OPPORTUNITY

“We don’t want a ‘grand opening/grand closing’ mentality when it comes to psychological health and safety – for people to see it as a finite initiative. We want it to get into the culture.”

“We’re trying to connect the dots. We continually ask, ‘How is this already happening?’”

— Pamela MacLean
Workplace Health
Promotion Coordinator
Nova Scotia Health Authority

In April 2015, nine district health authorities merged to form a new, province-wide health agency in Nova Scotia. With more than 24,000 staff and another 15,000 learners and volunteers delivering services, Nova Scotia Health Authority is the largest tertiary health organization in Atlantic Canada. The changes of amalgamation made an already pressured healthcare environment even more so, underscoring the need for mental health awareness, support and services. The question was where to begin.

“The impact of the organizational change was huge,” says Katrina Philopoulos, Manager Occupational Health safety and Wellness at the Nova Scotia Health Authority (NSHA). “We knew people were going to face stresses and struggles, and there was a real need for attention to psychological health and safety. The good news is that change brings opportunity.”

The organization’s CEO, Janet Knox, proved to be a vocal advocate. She signed the Mental Health Commission’s [Declaration of Commitment for Psychological Health and Safety in Healthcare](#), talks about mental health with staff, and is part of an external

CEO group focused on workplace mental health and safety. Having a leader willing to model these attitudes and behaviours helped set the right tone.

To gain momentum on the ground, NSHA looked to its pre-amalgamation experience for a starting point. Several former districts had been engaged in a research project to pilot the [National Standard for Psychological Health and Safety in the Workplace](#) in 2013 and had success with [The Working Mind](#) anti-stigma education program. The Working Mind quickly won favour as the lead tool for advancing workplace psychological health

and safety because it was well researched and had proven results.

MENTAL HEALTH LITERACY AT NSHA

To date, over 1,500 staff have received The Working Mind training, and registrations for the popular voluntary sessions routinely fill up quickly.

“We’re fortunate to have a strong facilitator pool that is representative of all levels of our organization. As we rolled the program out provincially, it was a priority to reflect a range of staff experiences,” says Philopoulos. “The training is definitely having an impact. I’ve been in meetings where people have talked about having a ‘yellow’ day – referring to the mental health continuum. It’s becoming embedded.”

CONNECTING THE DOTS

The healthcare accreditation process provided pre-existing tools to advance the NSHA’s psychological health and safety agenda. Accreditation Canada mandates a direct survey of all employees that, while not directly about mental health, yielded data NSHA could use to infer a baseline sense of employee wellness.

At every turn, the organization looked for opportunities to connect prior or existing efforts instead of starting over.

“We’re trying to connect the dots,” says MacLean. “We continually ask, ‘How is this already happening?’”

NSHA continues to explore linkages between its violence prevention and risk assessment policies and physical and psychological safety, and has built a psychological health and safety component into its occupational health, safety and wellness (OHSW) program. It is also looking at ways to use the employee and family assistance plan (EFAP) as a feedback channel to track top issues.

KEEPING PEOPLE IN THE LOOP – AND THE SPOTLIGHT

Every Tuesday, NSHA employees receive an email that briefs staff on news and events happening both provincially and by zone across the organization. Leadership forums provide regular health and safety moments for sharing information. In 2018, NSHA launched a quarterly OHSW newsletter to showcase psychological health and safety content – distributed electronically and by other means to reach as many staff as possible.

All of this supports strong communication, as emphasized in frameworks like the Excellence, Innovation and Wellness Standard from Excellence Canada, which NSHA is pursuing at the Bronze level by December 2020.

NSHA has focused on employee recognition as well.

“We have formally recognized all staff who were nominated by their peers as making a positive impact to the psychological safety of their work area,” says MacLean. “Recognition matters: it’s about people, and people establish culture.”

THE CHALLENGE OF MEASURING PROGRESS

Like many organizations, NSHA has found data collection and measurement challenging. It has evaluated The Working Mind in terms of numbers of people trained and began a randomized control study, impact-measurement trials with the MHCC in fall 2018. NSHA also tracks EFAP utilization, workforce trends and long-term disability claims provincially. Still, there are information gaps.

“In certain pockets, we know our short-term disability rates,” says Philopoulos, “and where we do, mental health-related issues are the number-two cause. But we’re trying to decide what we should be tracking. We want to make sure we’re looking not just at lagging indicators but also leading indicators – like training opportunities and uptake.”

The organization is part of a group with Alberta Health Services and other entities looking at benchmarking measures for all aspects of health and safety.

Even though comprehensive data aren’t always available, the NSHA team is working to make a difference. A recent pilot project that is currently underway in a large emergency department has highlighted the need for education and resources on the topics of Compassion Fatigue/Second Victim. Thus far the response to the pilot has been positive for both NSHA team members involved and the organization, as participant feedback has confirmed that staff feel heard and validated, increasing their workplace satisfaction, thus increasing their ability to provide quality patient care.

“Yes, there’s still work to do,” says MacLean. “But people are talking about psychological health and safety as part of the culture – there is commonality in the language being used.”



Read more about the lessons learned from the Nova Scotia Health Authority’s experience and access tools and templates.

OUR JOURNEY AT A GLANCE

2015
NSHA forms

2016
Begins pursuit of the Excellence, Innovation and Wellness standard.

2016
Joins the By Health, For Health Collaborative

2017
Signs the By Health, For Health Declaration of Commitment to Psychological Health and Safety in Healthcare

2018
Launches newsletter with feature content on psychological health and safety

2018
Passes 1,000-person milestone with The Working Mind training



MICHAEL GARRON HOSPITAL

THE RIGHT THING TO DO

“If we create an environment where people can care for themselves and for patients, the quality of care can only improve.”

“We don’t have a conversation here today about change without asking, ‘How will it affect staff and have we prepared people well for it?’”

— **Christine Devine**
Wellness Specialist
Michael Garron Hospital

When its 2004 quarterly staff engagement surveys showed low trust scores, Toronto’s Michael Garron Hospital (Toronto East General Hospital at the time) knew it needed to do something. Getting to the bottom of the issues — and turning the results around — launched the hospital on a journey of embedding psychological health and safety into its culture that continues to this day.

The 2004 survey results revealed hospital employees didn’t understand the organization’s goals, felt their work wasn’t valued, and perceived a general lack of transparency. The organization was also aware that frontline healthcare workers experience more violence on the job than any other profession — with the toll of higher rates of chronic disease, sleep problems, headaches, burnout and lost time. All of this pointed to the need for a concentrated focus on psychological health and safety in the workplace.

“It’s pretty clear there is a direct connection between provider and patient wellness,” says Wellness Specialist Christine Devine. “We

don’t really have a choice in healthcare but to address it. Ethically, it’s just the right thing to do.”

The *National Standard for Psychological Health and Safety in the Workplace* didn’t exist at the time, so the Michael Garron Hospital team reached out to experts in the field for advice on what to do. Those explorations led to a workplace violence prevention training program developed in collaboration with union partners, the Ministry of Labour and hospital leadership; the establishment of a physical wellness centre; and the incorporation of mental health into the hospital’s strategic plan.

In 2008, Michael Garron became the first hospital in Canada to have a standalone mental health strategy.

THE STIGMA OF THE “SUPERNURSE” AND THE INFALLIBLE PHYSICIAN

“We knew early on that we needed to shift our culture,” Devine notes. “There’s a lot of pressure on doctors and nurses to be superheroes. People worry that if they admit they’re not managing well, they’ll lose credibility. We needed to get people talking openly, acknowledging the need for self-care and the reality of phenomena like compassion fatigue.”

Bringing in outside perspectives has helped. Orlando da Silva, former president of the Ontario Bar Association, spoke to physicians about the common pressures on lawyers and doctors, openly acknowledging the mental health impacts and need for self-care. Hearing another senior professional’s perspective helped break down the stigma surrounding mental health.

Over time, a number of measures have been put in place to facilitate culture change. All staff receive emotional intelligence training as part of their orientation, and an annual mandatory refresher for workplace violence prevention training. Physicians now must

complete a short online learning course on burnout and compassion fatigue before being reappointed. Daily huddles provide opportunities for teams to review high-risk cases and prepare for the day – and to recognize people for their contributions.

“Our senior team shows up to the huddles,” says Devine. “They’ve been extraordinary in championing all of this work. There’s also an ‘Ask Us’ hotline that gives staff direct access to senior team members with a two- to three-day turnaround for answers to questions. That senior involvement has helped solidify the importance of psychological health and safety and also addressed those old issues of trust and transparency going back to 2004.”

THE IMPACT ON PATIENT OUTCOMES

Today, Michael Garron Hospital measures employee engagement once a year, with rigorous follow-up with managers to identify priorities for action. After implementing its approach to psychological health and safety, the hospital saw significant gains in engagement and reductions in mental health-related long-term disability and prescription drug costs. These have since risen again.

“The numbers have gone up as a reflection of the broader stresses of the healthcare sector, promotion of psychological supports, and specific challenges around our ongoing expansion,” says Devine. “We’ve learned that whether they go up or down, they are directly correlated with patient outcomes. Complaints, wait times, falls, infections and mortality rates all go up when employee mental health scores decline. We know this because we’ve been tracking since 2004.”

In a highly unionized environment with 11 collective agreements and 13 bargaining units, building a rapport with the unions has been essential – ensuring they are part of the support mechanisms available to get people the help they need and on the path to rehabilitation.

MEASURING IMPACTS, KNOWING WHAT COUNTS

The hospital uses a scorecard to evaluate its programs and engagement scores against the 13 psychosocial factors of the Standard – a tool that has evolved from its original form to include Maslow’s hierarchy of needs, with time and resources at the base.

“If those two scores don’t change, we can’t expect anything on top of them to change,” observes Devine.

All managers and supervisors go through the Queen’s University Leading a Mentally Healthy Workplace Certification Program, which deals with everything from clearly recognizing behaviour changes and having sensitive conversations to bringing people back after a mental health leave.

Reflecting on all that Michael Garron Hospital has accomplished, Devine says there’s still more to do.

“The work is never done. It’s all-encompassing. But we’ve embedded the right philosophy. We don’t have a conversation here today about change without asking how will it affect staff and have we prepared people well for it.”



Read more about the lessons learned from Michael Garron Hospital’s experience and access tools and templates.

OUR JOURNEY AT A GLANCE

2006
Michael Garron Hospital opens physical wellness centre

2007
Begins workplace violence prevention training

2008
Becomes first hospital in Canada with standalone mental health strategy

2011
Launches team huddles

2016
Joins the By Health, For Health Collaborative

2017
Signs the By Health, For Health Declaration of Commitment to Psychological Health and Safety in Healthcare

ESTABLISHING THE STANDARD

Health Canada (HC) and the Public Health Agency of Canada (PHAC) have both implemented the [National Standard for Psychological Health and Safety in the Workplace](#) in addition to contributing to its development alongside Human Resources and Skills Development Canada, the Mental Health Commission of Canada, the Great-West Life Centre for Mental Health in the Workplace and Bell Canada. These are highlights from their shared implementation journey.

GETTING STARTED

HC and PHAC had been working with the World Health Organization definition of a healthy workplace since 2012, recognizing workplace wellness as a strategic priority for building an effective workforce for the future. Both organizations already had compiled employee assistance program (EAP), disability and other workplace wellness data to make a compelling case for implementing a mental health and wellness strategy: the Standard provided the readymade definition and value proposition of what that strategy should be.

Rather than roll out the Standard on a mass scale, HC and PHAC’s Executive initially

opted to conduct pilots and then move to an organization-wide implementation based on the results. The first was a six-month pilot initiated at PHAC in the Health Promotion and Chronic Disease Prevention branch. That was to be migrated to other branches of PHAC and at Health Canada. By the time the results of the first pilot were shared with senior management, all branches across the two organizations were on board.

Rather than look for new sources of data to baseline and measure results, the branches mapped their annual government-wide Public Service Employee Survey findings to the [Guarding Minds at Work](#) framework to identify areas of strength and strategies for continuous improvement.

LESSONS LEARNED

Ultimately, the pilot and early lessons from the branches yielded four takeaways:

- 1 Real, visible commitment from the top and continuous employee engagement were essential;
- 2 Clear leadership and governance needed to be in place;
- 3 A workplace wellness infrastructure (including a Centre for Mental Health, Wellness and Respect in the Workplace) was required to support implementation of the Standard; and
- 4 That infrastructure needed appropriate investment (human and financial).

HC and PHAC’s Executive Committees approved the Multi-Year Mental Health and Wellness Strategy in April 2015 with a resounding “Yes!” The strategy was accompanied by a business case for organization-wide implementation of the Standard.

“We said, ‘Don’t call this an initiative. People wait for initiatives to be over. This is the way we work.’”

— Delroy Lawrence
 Executive Lead, Centre for Mental Health, Wellness and Respect in the Workplace, Human Resource Services Directorate, Health Canada

Getting the word out to drive implementation

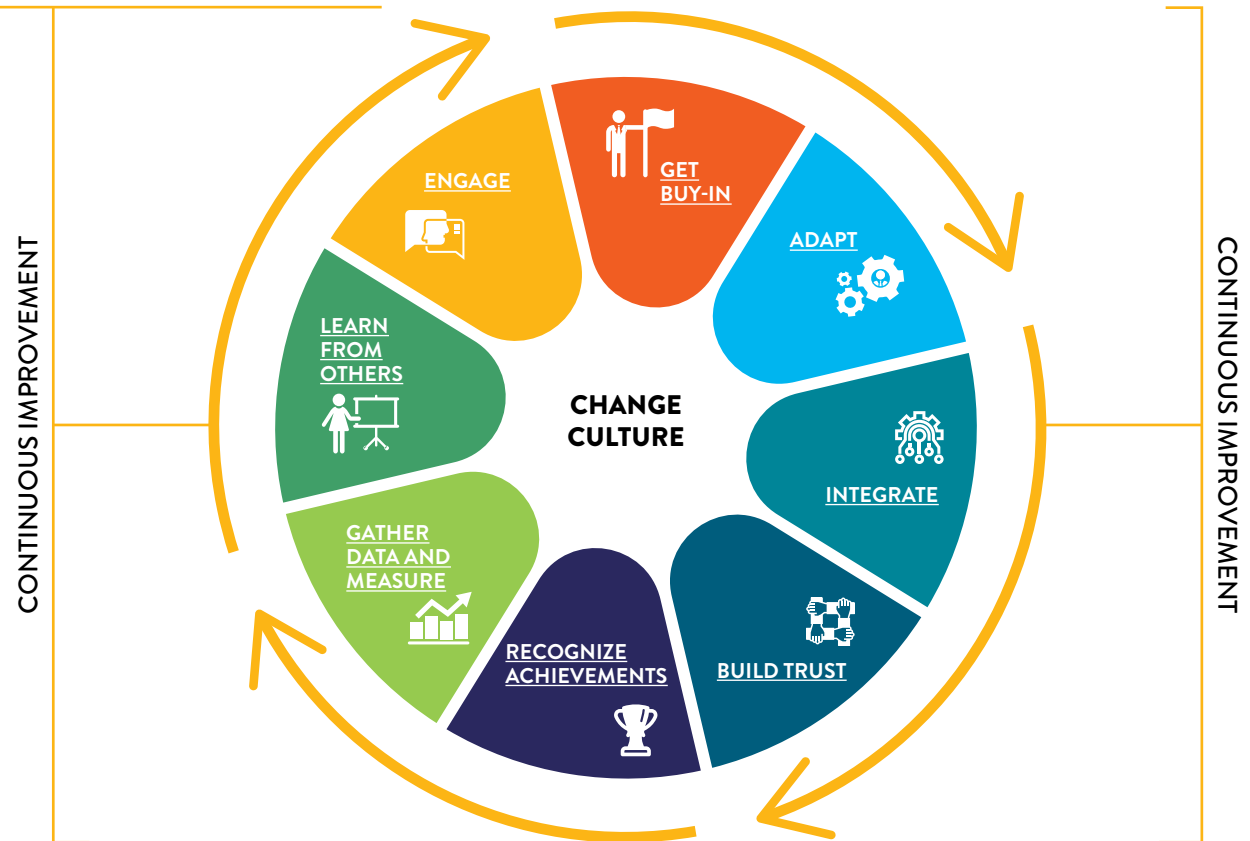
After helping champion the development of the Standard, the MHCC undertook a significant campaign of workplace mental health promotion, raising awareness of the Standard and encouraging implementation. That effort led to a strategic partnership with HealthCareCAN, with research and stakeholder consultations on the unique needs and challenges of healthcare organizations. The end result was the establishment of the By Health, For Health Collaborative, which has helped members be better prepared for effective implementation.

IMPLEMENTATION PRINCIPLES AND TOOLS















While every healthcare organization’s journey toward workplace psychological health and safety is different, the experiences of the institutions featured in this toolkit reveal some common principles to help pave the way to success.

At the heart of the process is the goal of changing culture: making psychological health and safety not an add-on but instead fundamental to the way organizations recruit, train and operate – and how their people relate to their jobs, their peers and patients. Inherent in that culture, and giving the culture shift momentum, is a drive toward continuous improvement for the benefit of patients, staff and taxpayers alike.

FIGURE 1. Eight Principles of Effective Implementation



The principles identified complement and align with the “how-to” advice of *Assembling the Pieces*, the Canadian Standards Association–MHCC guide to implementing the *National Standard for Psychological Health and Safety in the Workplace*. The guide is widely used among champion organizations in healthcare and beyond, and is a recommended reference along with this healthcare-focused toolkit.

ASSEMBLING THE PIECES	HEALTHCARE IMPLEMENTATION PRINCIPLES*		
Building the foundation	 BUILD TRUST	 GET BUY-IN	
What are your opportunities?	 ADAPT	 GATHER DATA AND MEASURE	 INTEGRATE
	 LEARN FROM OTHERS	 RECOGNIZE ACHIEVEMENTS	
What are your objectives?	 BUILD TRUST	 ENGAGE	 INTEGRATE
Implement the plan	 ADAPT	 ENGAGE	 GATHER DATA AND MEASURE
	 RECOGNIZE ACHIEVEMENTS		

*NOTE: The table is for illustration only, to show the relationship between the principles and the four parts of *Assembling the Pieces*. Any one principle may map to multiple components of the *Assembling the Pieces* approach.



▶ GET BUY-IN

Every organization featured in this toolkit said the visible, dedicated support of internal leaders was key to the success of their efforts. Buy-in at the top helps drive conversations, garner support for key initiatives, model desired behaviours and operationalize psychological health and safety through policies and governance structures.

INSIGHTS FROM EXPERIENCE

Alberta Health Services

- Given the scale of **ALBERTA HEALTH SERVICES** and the fact it was just getting off the ground, its leaders were wary of taking on any more work than the organization needed to. However, the Workplace Health and Safety team was able to leverage its prior experience implementing a wellness strategy for the former Calgary Regional Health Authority that interwove broader wellness with mental health specifically.

Michael Garron Hospital

- As a teaching institution, the **MICHAEL GARRON HOSPITAL** was already disposed to contributing to the betterment and wellbeing of its people. In terms of establishing a persuasive “business case” for senior leaders, the organization has consistently linked the mental health status of its people with patient outcomes — and seen a direct correlation between them.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU GET BUY-IN FOR YOUR IMPLEMENTATION EFFORTS:

A Recognized Leading Practice

Implementing the Standard in healthcare organizations has been recognized by Accreditation Canada/Health Standards Organization as a Leading Practice. This designation brings further credibility to healthcare organizations implementing the Standard and can be used to gain buy-in with leadership.



Framework for the Implementation of the National Standard for Psychological Health and Safety in the Workplace

As a model of how to win buy-in from leaders, this 13-slide presentation was prepared by Health Canada for its own purposes — with linkages to *Assembling the Pieces*, a multi-year workplace wellness strategy and step-by-step tables that act as a worksheet to create a timeline.



Join the Movement Video

This video highlights the unique importance of psychological health and safety in healthcare settings and why organizations sign the Declaration of Commitment to Psychological Health and Safety in Healthcare.



Tipsheet: How to Collect and Use Testimonials

Sharing stories and quotes can be a powerful way to make issues real and relatable and motivate cultural change. These tips will help you decide when and how to use testimonials to support your psychological health and safety efforts.



Workplace Mental Health Issue Brief

This concise summary of research findings describes how mental health and mental illness affect the workplace, touching on the cost of mental health problems and suggesting ways to sustain momentum and transform the healthcare system.





INTEGRATE

All of the featured organizations seized opportunities to build mental health, general wellbeing or specific psychological health and safety considerations into existing corporate strategies, policies and governance mechanisms. This integration helps speed up implementation and reinforce the adoption of practices and attitudes.

INSIGHTS FROM EXPERIENCE

Ontario Shores
Centre for Mental
Health Sciences

- ONTARIO SHORES** is looking beyond even corporate policy and governance to recruitment and onboarding — seeking out job candidates who are already aligned with the organization’s perspective on psychological health and safety to further reinforce the culture it has developed.

Nova Scotia
Health Authority

- THE NOVA SCOTIA HEALTH AUTHORITY** embedded aspects of the 13 psychosocial factors into its Code of Conduct, respectful workplace and violence prevention policies.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU INTEGRATE YOUR IMPLEMENTATION EFFORTS:

Enhanced Integrated Wellness Plan

This PowerPoint presentation details the five pillars and nine components of Ontario Shores’ Integrated Wellness Plan, with a Psychological Health Index linked to the 13 psychosocial factors of the Standard.



Executives & Managers – Tips for Understanding the 13 Psychosocial Factors

A guide for leaders, this resource covers the stages of change management along with the responsibilities and expected behaviours of executives and managers.



Just Culture Policy

Here, a succinct, two-page policy explains the hospital’s approach to a “just” culture that ensures safe patient care through non-blaming practices for reporting errors and system weaknesses when they are noticed.



Psychological Health and Safety Steering Committees Action Plan Summary

This placemat-style chart presents an overview of the organization’s psychological health and safety framework, covering its purpose, enablers and risks, success measures and project management.



Resource Plan for Building Capability Amongst Employees

In a single-page diagram, Ontario Shores illustrates the roadmap for its capacity-building initiative to support implementation of the Standard.



Template: Policy

This tool provides a ready-to-fill-out version of the kind of policy statement provided by Michael Garron Hospital, with suggested wording for ease of completion.



Workplace Wellness Toolkit

This collection of documents contains a range of campaign elements to show how Health Canada and PHAC created a practical, all-in-one resource to disseminate the key concepts and activities of its workplace wellness initiative.





BUILD TRUST

To embrace any psychological health and safety initiative, frontline staff and practitioners need to be convinced their organization’s intentions are sincere, its decisions ethical, and its plans credible and achievable. Transparent communication and open collaboration both contribute to this. Starting with pilot initiatives and sharing successes also helps, as do broader initiatives such as performance measurement and professional development.

Trust-building is especially important for organizations undergoing significant change. This may be particularly relevant to healthcare: all four organizations featured in this toolkit have experienced some kind

of transformation in the past decade, from amalgamation (Alberta Health Services and Nova Scotia Health Authority) to reorganization (Michael Garron Hospital and Ontario Shores).

INSIGHTS FROM EXPERIENCE

**Ontario Shores
Centre for Mental
Health Sciences**

- The team at **ONTARIO SHORES** said the very fact there was a formal Standard to start from helped build trust throughout their organization in the psychological health and safety effort.

**Michael Garron
Hospital**

- The **MICHAEL GARRON HOSPITAL** has an Organizational Confidence Working Group that looks at engagement scores and, specifically, employee trust and develops strategies for internal communication, huddles and the like to demonstrate action on feedback received.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU BUILD TRUST AROUND YOUR IMPLEMENTATION EFFORTS:

Being a Mindful Employee Posters

These posters engage employees in workplace mental health while building trust and showing organizational commitment.



Psychological Health and Safety Poster

A poster-format letter from the President and CEO to employees about the importance of psychological health and safety, the hospital’s relationship with MHCC, a brief timeline of their experience in the area and where they plan to go with this directive.



Summary of Our Journey

This timeline approach built trust by showing clear progress toward a psychologically healthy and safe workplace.





▶ ENGAGE

Engagement involves communication, fostering a shared understanding, and creating opportunities for people at all levels of the organization to be involved in psychological health and safety-related activities. One of the keys seems to be ensuring a clear path of communication from the executive suite to the front line — and vice versa — so that messages are delivered transparently and staff have the chance to ask questions, voice concerns and feel heard and acknowledged.

INSIGHTS FROM EXPERIENCE

**Ontario Shores
Centre for Mental
Health Sciences**

- **ONTARIO SHORES** uses multiple ways to engage staff such as All Staff Forums, lunches with the CEO, evening CEO unit visits, focus groups and surveys.

**Nova Scotia
Health Authority**

- The **NOVA SCOTIA HEALTH AUTHORITY** has a steering committee from People Services with membership from all regions of the province. One of its considerations as the rollout continues is how to translate knowledge for each zone — making sure that regional needs and understanding are reflected.

**Michael Garron
Hospital**

- To prevent rumours from circulating, **MICHAEL GARRON HOSPITAL** has developed a formal communications strategy encompassing a wide range of vehicles — newsletters, broadcast emails, a President’s Forum, face-to-face managerial meetings and more — to engage staff and share information.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU ENGAGE PEOPLE IN YOUR IMPLEMENTATION EFFORTS:

Building Capability Framework for the Integrated Wellness Plan

This one-page graphic with explanatory notes shows Ontario Shores’ strategy to build and sustain psychological health and safety capability among employees.



Bully-Free Workplace Poster

This poster expresses the hospital’s commitment to a bully-free workplace and its zero-tolerance policy on workplace violence, harassment and discrimination.



Code of Conduct

A colourful, easy-to-scan poster itemizing the key principles of the NSHA’s Code of Conduct.



Connecting Two Canadian Frameworks: The LEADS in a Caring Environment Capabilities Framework and the National Standard for Psychological Health and Safety in the Workplace

This document is designed to help leaders implement the Standard from a LEADS perspective.



Psychological Health and Safety Two-pagers

This concise handout provides an overview of psychological health and safety, why it matters, the Standard and how to get involved.



Tipsheet: Anti-stigma Approaches

This two-pager provides helpful tips on how to take effective action against stigma in healthcare environments specifically.





RECOGNIZE ACHIEVEMENTS

Recognizing people for their contributions, personal courage and leading example not only makes them feel appreciated and valued but has also been shown to support good mental health. Recognizing progress as an organization overall fosters a sense of collective accomplishment and purpose. That’s why recognition is one of the 13 psychosocial factors in the *National Standard for Psychological Health and Safety in the Workplace*.

Recognition doesn’t always have to fall under the “big” label of psychological health and safety: it can be used to acknowledge the completion of a mental health course, identify a psychological safety hazard for peer-to-peer “thumbs up”

activities that invite staff to recognize their colleagues. Whether formal or informal, planned or spontaneous, it reinforces other principles outlined in this toolkit, for example by directly supporting engagement and helping build trust.

INSIGHTS FROM EXPERIENCE



- In 2017, the **NOVA SCOTIA HEALTH AUTHORITY** sent certificates of recognition to every employee who had been involved in a psychological health and safety-related effort.

Certificate of Recognition

This blank certificate provides a simple model for a tool to recognize employees’ contributions.



Summary of Alberta Health Services Appreciation

This brief summary provides descriptions of the many programs underway at Alberta Health Services to recognize and foster appreciation for employees, from President’s Excellence Awards and long-term service awards to appreciation cards featuring employee art and photos.



Tipsheet: Reward and Recognition

Suggestions and advice for organizations seeking ways to recognize their people.





GATHER DATA AND MEASURE

The organizations featured in this toolkit all acknowledged the challenge and importance of gathering meaningful data and measuring impact when it comes to psychological health and safety in the workplace. Each described ways of using existing internal or external mechanisms as a starting point, with employee surveys by far the most common tool. To provide a single, comprehensive and up-to-date resource, MHCC and its partners have developed *Caring for Healthcare Assessment Tools* for measuring psychological health and safety in healthcare.

INSIGHTS FROM EXPERIENCE

Michael Garron Hospital

- The **MICHAEL GARRON HOSPITAL** used the accreditation-related surveys to start building a baseline.

Alberta Health Services

- **ALBERTA HEALTH SERVICES** leveraged a recurring, province-wide healthcare wellness survey, its engagement survey and a Density census to inform its plans.

Nova Scotia Health Authority

- **NOVA SCOTIA HEALTH AUTHORITY** dug into productivity, lost time and short-term illness stats to provide a business case to its CFO.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU GATHER DATA AND MEASURE TO SUPPORT YOUR IMPLEMENTATION EFFORTS:

Caring for Healthcare Assessment Tools

Designed to assess the unique stressors in the healthcare sector, this survey provides a convenient, easy-to-administer measurement tool.



Mental Wellness Scorecard

This infographic incorporates Maslow's Hierarchy of Needs and shows how Michael Garron Hospital measures for each level.



Psychological Health Index

This psychological health scorecard is based on Maslow's Hierarchy of Needs and the 13 psychosocial factors of the Standard.



Psychological Health Scorecard

This scorecard covers the 13 psychological factors, current initiatives/supporting programs in place and performance indicators that go along with these.





▶ ADAPT

One of the consequences of change is usually more change. As organizations work toward embedding psychological health and safety into their cultures, the resulting changes can have ripple effects that need to be managed. As well, over time conditions and circumstances change — such as organizational leadership and funding — that demand adaptation. This requires careful, disciplined change management approaches.

INSIGHTS FROM EXPERIENCE

Mental Health
Commission
of Canada

- Each of the organizations featured in this toolkit took part in the three-year national Case Study Research Project (CSRP) spearheaded by the MHCC to gain insight into what some of those adaptations might be, and how to undertake them.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU ADAPT YOUR ORGANIZATIONAL PRACTICES FOR SUCCESSFUL IMPLEMENTATION:

Corporate Psychological Health Index

This file includes all the measures tracked by Ontario Shores as part of its Psychological Health Index, including how aspects of Maslow's Hierarchy of Needs have been adapted to the organization's reality.



Organizational Change Model

This two-pager provides answers to frequently asked questions about Ontario Shores' approach to organizational change and includes a graphical overview of the process.





LEARN FROM OTHERS

Inviting guest speakers in, participating in webinars and taking advantage of existing training programs like Mental Health First Aid, Understanding Stigma, The Working Mind and Being a Mindful Employee are all ways the featured organizations in this toolkit said they learned from others to support their journeys.

Because every organization's experience is different, it's easy to think you have to start from scratch to build exactly the resources you need to support your own. Yet

adapting existing tools to meet your organization's needs can help speed up the process and save significant time and effort.

INSIGHTS FROM EXPERIENCE



- ALBERTA HEALTH SERVICES and the MICHAEL GARRON HOSPITAL used Mental Health First Aid to gather baseline data on employee mental health.
- The NOVA SCOTIA HEALTH AUTHORITY continues to roll out The Working Mind training.

TOOLBOX

HERE ARE SOME RESOURCES TO HELP YOU LEARN FROM OTHERS:

<p><u>Assembling the Pieces: Health Canada Customization</u> Health Canada and PHAC's adaptation of the <i>Assembling the Pieces</i> guidance to suit its own organizational needs.</p>	
<p><u>Assembling the Pieces Online Toolkit</u> Training in how to carry out the <i>Assembling the Pieces</i> approach.</p>	
<p><u>Being a Mindful Employee: An Orientation to Psychological Health and Safety in the Workplace</u> An introduction to the 13 psychosocial factors embedded in the Standard.</p>	
<p><u>Developing a Workplace Mental Health Strategy – A How-to Guide for Organisations</u> This Australian guide provides a step-by-step approach to developing and implementing a workplace mental health strategy.</p>	
<p><u>Implementing the National Standard in the Canadian Healthcare Sector – A Cross-Case Analysis</u> A review of the findings from the MHCC-led implementation case study for the Standard.</p>	
<p><u>Mental Health First Aid Training</u> Training in how to support people experiencing a mental health issue.</p>	
<p><u>The Working Mind Training</u> Anti-stigma training for trainers, managers/supervisors and frontline staff.</p>	
<p><u>Understanding Stigma Training</u> Anti-stigma training for healthcare providers and frontline clinicians.</p>	
<p><u>Workplace Strategies for Mental Health</u> Various training options to strengthen knowledge and skills in workplace mental health.</p>	

REFERENCES AND LINKS

Through our compilation of this toolkit, the following resources were identified as central to, or especially helpful in, understanding workplace psychological health and safety, the *National Standard for Psychological Health and Safety in the Workplace*, approaches to implementation and more:

OVERARCHING RESOURCES

- [Assembling the Pieces: An Implementation Guide to the Standard](#)
- [Caring for Healthcare Workers: Assessment Tools](#)
- [National Standard for Psychological Health and Safety in the Workplace](#)

RESOURCES FOR: GETTING BUY-IN

- [A Recognized Leading Practice](#) – Health Standards Organization
- [Framework for the Implementation of the National Standard for Psychological Health and Safety in the Workplace](#) – Health Canada
- [Join the Movement Video](#) – MHCC
- [Tipsheet: How to Collect and Use Testimonials](#) – MHCC
- [Workplace Mental Health Issue Brief](#) – MHCC & HealthCareCAN

RESOURCES FOR: INTEGRATION

- [Enhanced Integrated Wellness Plan](#) – Ontario Shores Centre for Mental Health Sciences
- [Executives & Managers – Tips for Understanding the 13 Psychosocial Factors](#) – Health Canada
- [Just Culture Policy](#) – Michael Garron Hospital
- [Psychological Health and Safety Steering Committees Action Plan Summary](#) – Alberta Health Services
- [Resource Plan for Building Capability Amongst Employees](#) – Ontario Shores Centre for Mental Health Sciences
- [Template: Policy](#) – MHCC
- [Workplace Wellness Toolkit](#) – Health Canada

RESOURCES FOR: BUILDING TRUST

- [Being a Mindful Employee Posters](#) – MHCC
- [Psychological Health and Safety Poster](#) – Michael Garron Hospital
- [Summary of Our Journey](#) – Alberta Health Services

RESOURCES FOR: ENGAGEMENT

- [Building Capability Framework for the Integrated Wellness Plan](#) – Ontario Shores Centre for Mental Health Sciences
- [Bully-Free Workplace Poster](#) – Michael Garron Hospital
- [Code of Conduct](#) – Nova Scotia Health Authority
- [Connecting Two Canadian Frameworks: The LEADS in a Caring Environment Capabilities Framework and the National Standard for Psychological Health and Safety in the Workplace](#) – MHCC
- [Psychological Health and Safety Two-pagers](#) – MHCC
- [Tipsheet: Anti-stigma Approaches](#) – MHCC

RESOURCES FOR: RECOGNIZING ACHIEVEMENTS

- [Certificate of Recognition](#) – Nova Scotia Health Authority
- [Summary of Alberta Health Services Appreciation](#) – Alberta Health Services
- [Tipsheet: Reward and Recognition](#) – MHCC

RESOURCES FOR: GATHERING DATA AND MEASUREMENT

- [Caring for Healthcare Assessment Tools](#) – MHCC
- [Mental Wellness Scorecard](#) – Michael Garron Hospital
- [Psychological Health Index](#) – Ontario Shores Centre for Mental Health Sciences
- [Psychological Health Scorecard](#) – Michael Garron Hospital

RESOURCES FOR: ADAPTATION

- [Corporate Psychological Health Index](#) – Ontario Shores Centre for Mental Health Sciences
- [Organizational Change Model](#) – Ontario Shores Centre for Mental Health Sciences

RESOURCES FOR: LEARNING FROM OTHERS

- [Assembling the Pieces: Health Canada Customization](#) – Health Canada
- [Assembling the Pieces Online Toolkit](#) – MHCC
- [Being a Mindful Employee: An Orientation to Psychological Health and Safety in the Workplace](#) – MHCC
- [Developing a Workplace Mental Health Strategy – A How-to Guide for Organisations](#) – Heads up / beyondblue
- [Implementing the National Standard in the Canadian Healthcare Sector – A Cross-Case Analysis](#) – MHCC
- [Mental Health First Aid Training](#) – MHCC
- [The Working Mind Training](#) – MHCC
- [Understanding Stigma Training](#) – CAMH / MHCC
- [Workplace Strategies for Mental Health](#) – Great-West Life Centre for Mental Health in the Workplace